

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

TELEPHONE: (714) 557-3800

INTELLECTUAL PROPERTY LAW
12400 WILSHIRE BOULEVARD, 7TH FLOOR
LOS ANGELES, CA 90025

FACSIMILE: (714) 557-3347

**RECEIVED
CENTRAL FAX CENTER****FACSIMILE COVER SHEET****APR 11 2005**Deliver to: Nitin C. Patel, USPTOArt Group: 2116Facsimile No.: 703 872-9306Date: April 11, 2005From: James Henry, Reg. No. 41,064Our Docket No.: 42390P12358Number of pages 14 including this sheet.Application No.: 10/090,080Filing Date: 3/1/2002Docket Due Date(s): 6/7/2005

Enclosed are the following documents:

<input checked="" type="checkbox"/> Amendment: <u>Response</u> (<u>10</u> pgs)	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Appeal Brief (<u> </u> pgs)	<input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Application: <u> </u>	<input type="checkbox"/> Petition for: <u> </u>
(<u> </u> pgs) w/cover & abstract)	<input type="checkbox"/> Request for Continued Examination (RCE)
<input type="checkbox"/> Assignment & Cover Sheet (<u> </u> pgs)	<input type="checkbox"/> Reply Brief (<u> </u> pgs)
<input checked="" type="checkbox"/> Certificate of <u>Facsimile</u>	<input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)
<input type="checkbox"/> Continued Prosecution Application (CPA)	<input type="checkbox"/> Request to Rescind Previous Nonpublication Request
<input type="checkbox"/> Declaration & POA (<u>4</u> pgs)	<input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter
<input type="checkbox"/> Drawings: <u> </u> sheets, <u> </u> figures	<input type="checkbox"/> Response to Written Opinion (<u> </u> pgs)
<input type="checkbox"/> Extension of Time: <u> </u>	<input type="checkbox"/> Terminal Disclaimer
<input checked="" type="checkbox"/> Fee Transmittal (in duplicate)	<input type="checkbox"/> Transmittal of Publication Fee Due
<input type="checkbox"/> IDS & PTO/SB/08 (<u> </u> pgs)	<input checked="" type="checkbox"/> Transmittal Letter
<input type="checkbox"/> Other <u> </u>	

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.84)

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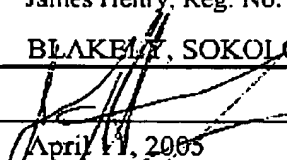
Pat Sullivan 4/11/2005
Pat Sullivan Date


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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	10/090,080
		Filing Date	March 1, 2002
		First Named Inventor	Hing Y. To
		Art Unit	2116
		Examiner Name	Nitin C. Patel
Total Number of Pages In This Submission	14	Attorney Docket Number	42390P12358

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Facsimile transmittal sheet</div>
<input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)		
<input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	James Henry, Reg. No. 41,064 BLAKELEY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	April 11, 2005

CERTIFICATE OF MAILING/TRANSMISSION	
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Typed or printed name	Pat Sullivan
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Date	April 11, 2005

Based on PTO/SB/21 (04-04) as modified by Blakeley, Sokoloff, Taylor & Zafman (Mj) 06/04/2004
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 0.00

Complete if Known

Application Number 10/090,080
Filing Date March 1, 2002
First Named Inventor Hing Y. To
Examiner Name Nitin C. Patel
Art Unit 2116
Attorney Docket No. 42390P12358

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) ☐ Credit any overpayments
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
30	0	50.00	\$0.00
Independent Claims	0	200.00	\$0.00
Multiple Dependent			

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	350	2203	180	Multiple Dependent claim, if not paid
1204	300	2204	150	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1) (\$) 0.00

*For number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1480	130	2480	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(a)	
1808	180	1808	180	Submission of Information Disclosure Sheet	
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	

Other fee (specify) _____

SUBTOTAL (2) (\$) _____

SUBMITTED BY

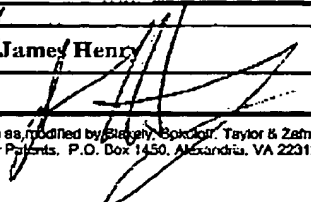
Name (Print/Type)	James Henry	Registration No. (Attorney/Agent)	41,064	Telephone	(714) 557-3800
Signature			Date	04/11/05	

Based on PTO/SD-17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (v. 12/15/2004).
SCND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		<i>Complete if Known</i>	
		Application Number	10/090,080
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	March 1, 2002
		First Named Inventor	Hing Y. To
TOTAL AMOUNT OF PAYMENT (\$) 0.00		Examiner Name	Nitin C. Patel
		Art Unit	2116
		Attorney Docket No.	42390P12358

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: <u>Blakely, Sokoloff, Taylor & Zafman LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. <input type="checkbox"/> Credit any overpayments	

FEE CALCULATION																																																																													
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Total Claims: 30 Independent Claims: 4 Multiple Dependent: _____	<table border="1"> <tr> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> <tr> <td>30 - 3d* = 0</td> <td>50.00</td> <td>\$0.00</td> </tr> <tr> <td>4 - 4* = 0</td> <td>200.00</td> <td>\$0.00</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>	Extra Claims	Fee from below	Fee Paid	30 - 3d* = 0	50.00	\$0.00	4 - 4* = 0	200.00	\$0.00																																																																			
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SUBMITTED BY		<i>Complete (if applicable)</i>	
Name (Print/Type)	James Henry	Registration No. (Attorney/Agent)	41,064
Signature		Telephone	(714) 557-3800
		Date	04/11/05

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 12/15/2004.
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Appl. No. 10/090,080
Amdt. dated 04/11/2005
Reply to Office Action of 03/07/2005

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APR 11 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.	:	10/090,080	Confirmation No. 4275
Applicant	:	Hing Y. To	
Filed	:	03/01/2002	
TC/A.U.	:	2116	
Examiner	:	PATEL, NITIN C	
Docket No.	:	42390P12358	
Customer No.	:	8791	

Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action of 03/07/2005, please amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks/Arguments begin on page 9 of this paper.